

10/501607
 Rec'd POT/PTC 66 MAR 2005

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PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT	Application Number	10/501,607
	Filing Date	
	First Named Inventor	Vilho Nissinen
	Title	Nozzle Array
	Group Art Unit	
	Examiner Name	
	Attorney Docket Number	BERGPAT-6

I hereby appoint:

☒ Practitioners at Customer Number 36528 →

☐ OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

☒ Applicant/Inventor

☐ Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.71(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Vilho Nissinen
Signature	<i>Vilho Nissinen</i>
Date	18.10.2004

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 3 forms are submitted.

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Statement under 37 CFR 3.71(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name Jussi Nykänen

Signature 

Date 18-10-2004

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Fax

I am the:



Applicant/Inventor



Assignee of record of the entire interest. See 37 CFR 3.71

Statement under 37 CFR 3.71(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Mika Linjamäki
Signature	<i>Mika Linjamäki</i>
Date	12-10-2004

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10/501607

Rec'd PCT/PTO 08 MAR 2005

PT 5/5001 (01-01)

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**Declaration
Submitted
with Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
Required)

Attorney Docket Number

BERGPAT-4

First Named Inventor

Vilho Niemi

COMPLETE IF KNOWN

Application Number

10/501,607

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Nozzle Array

(Title of the Invention)

The specification of which

Is attached hereto
OR

was filed on (MM/DD/YYYY)

01/14/2003

as United States Application Number or PCT International

Application Number

PCT/FI03/00022

and was amended on (MM/DD/YYYY)

07/14/2004

(if applicable).

I hereby state that I have reviewed and understood the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(a) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
20020073	FI	01/15/2002	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label	36528	Or	<input type="checkbox"/> Correspondence address below
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<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any)): Vilho			Family Name or Surname: Nissinen		
Inventor's Signature <i>Vilho Nissinen</i>				Date: 18.10.2004	
Residence: City: Numminen		State: FI		Country: Finland	
Citizenship: FI					
Mailing Address: Onkimaantie 195					
City: Numminen		State:		Zip: FIN-04660	
Country: Finland					
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any)): Mika			Family Name or Surname: Linjamaäki		
Inventor's Signature <i>Mika Linjamaäki</i>				Date: 18.10.2004	
Residence: City: Järvenpää		State: FI		Country: Finland	
Citizenship: FI					
Mailing Address: Viilarinkatu 6 A 2					
City: Järvenpää		State:		Zip: FIN-04440	
Country: Finland					
<input type="checkbox"/> Additional inventors are being named on the 0 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

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PTO/SB/DA (11-00)
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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)): Jussi		Family Name or Surname: Nykänen	
Inventor's Signature: <i>Jussi Nykänen</i>		Date: 18.10.2004	
Residence: City: Helsinki	State: FI	Country: Finland	Citizenship: FI
Mailing Address: Tehtaanlehti 20 A 11 Peltokulma 7 F			
City: Vantaa	State:	Zip: FI-01630	Country: Finland
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)):		Family Name or Surname:	
Inventor's Signature:		Date:	
Residence: City:	State:	Country:	Citizenship:
Mailing Address:			
City:	State:	Zip:	Country:
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)):		Family Name or Surname:	
Inventor's Signature:		Date:	
Residence: City:	State:	Country:	Citizenship:
Mailing Address:			
City:	State:	Zip:	Country:

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